

January 2013

Taxonomy in ProviderOne

The Agency is requiring providers to use a pre-assigned, 10-digit alphanumeric “taxonomy” code on all claims. Defined by the Centers for Medicare and Medicaid Services (CMS), a taxonomy code indicates a provider’s type and specialty and is associated with their NPI number. Providers will need to use taxonomy for billing and servicing/rendering (if applicable) providers on their claim in ProviderOne. The taxonomy used must be associated to the provider’s file in ProviderOne and be appropriate for the service they are billing for.

How do providers read the Taxonomy Code?

The national provider taxonomy codes identify a provider’s type and area of specialization, are 10 digits in length and include both alpha (letters) and numeric (numbers) characters. The first two digits are provider type, next two digits are provider specialty, and the next five digits are the provider subspecialty. The last character is reserved for future use so it will be displayed as an “X.”

How was a provider’s taxonomy assigned?

When a provider’s file was converted from the old payment system into ProviderOne, the Agency mapped each of the provider’s type and specialty to the equivalent national provider taxonomy. The agency has no way of knowing which taxonomies a provider used when they registered their NPI at the national level – there is no national database for accessing taxonomies from CMS. Newly enrolled providers would pick their taxonomy from the national provider taxonomy list and the Agency would approve the taxonomy (s) if supported by the provider’s licensure or accreditation. There are literally thousands of national taxonomies however the Agency will only be using a subset of the national taxonomies.

How do providers know which taxonomy to use when billing ProviderOne?

When deciding which taxonomy to bill in ProviderOne, providers should consider the line of business they are billing for, and then select the taxonomy that best describes that line of business and service rendered. Additionally, providers should be careful and only bill using a taxonomy code that is associated with their file loaded in ProviderOne. During claims processing, ProviderOne validates that the taxonomy is associated with the provider and that the service is allowed by the taxonomy.

How do providers find their taxonomies in ProviderOne?

Below is a step by step process to check taxonomy codes attached to the billing provider’s file.

Log into ProviderOne with the profile:

- **Provider File Maintenance;** or
- **Provider Super User**

Then scroll down to the portal list

Provider
Provider Inquiry
Manage Provider Information
Initiate New Enrollment
Track Application

And click on **Manage Provider Information**

The system should now open at the **Business Process Wizard** screen displaying all the information steps.

Close Required Credentials Undo Update

Important - Step 11: EDI Submission Method is REQUIRED if FTP/Web Batch Submitter or Retrieving 835s.

View/Update Provider Data -

Business Process Wizard Provider Data Modification

<input type="checkbox"/>	Step	Required	Last Modification Date	Last Review Date	Status
<input type="checkbox"/>	Step 1: Basic Information	Required	10/26/2009	10/27/2009	Complete
<input type="checkbox"/>	Step 2: Locations	Required	07/01/2008	07/01/2008	Complete
<input type="checkbox"/>	Step 3: Specializations	Required	10/26/2009	11/19/2009	Complete

Now click on **Step 3:**

Specializations, this is the area of the provider file that displays the taxonomy codes.

ProviderOne opens the list of taxonomy codes which includes the start date and status.

Specialty/Subspecialty List: Note: Provider Type and Specialty/Subspecialty are your Taxonomy Codes.

Filter By : And

Operational Status: Active

<input type="checkbox"/>	Provider Type ▲▼	Specialty/Subspecialty ▲▼	Administration ▲▼	Start Date ▲▼	End Date ▲▼	Operational Status ▲▼	Status ▲▼
<input type="checkbox"/>	15-Eye and Vision Services Providers	2W-Optometrist/00000-Optometrist	HRSA	09/01/1989	12/31/2999	Active	Approved
<input type="checkbox"/>	19-Group	34-Single Specialty/00000-Single Specialty	HRSA	01/01/1987	12/31/2999	Active	Approved
<input type="checkbox"/>	19-Group	32-Multi-Specialty/00000-Multi-Specialty	HRSA	01/01/1987	12/31/2999	Active	Approved
<input type="checkbox"/>	20-Allopathic & Osteopathic Physicians	7X-Orthopaedic Surgery/00000-Orthopaedic Surgery	HRSA	05/01/1988	12/31/2999	Active	Approved

Locate the taxonomy code for the service to be billed.

Hint: If a group, you may want to use the general Multi-Specialty taxonomy **193200000X** for all claims and the rendering provider would use their specific taxonomy for the service.

Want to add a Taxonomy Code to your file?

At the Specialty/Subspecialty screen click on the **Add** button.

Close Add Update

Specialty/Subspecialty List: Note: Provide

Filter By :

Operational Status: Active

The system opens the Add Specialty Subspecialty screen to fill in information:

1. Pick the Location or highlight "All"
2. The Administration is **HRSA**
3. Pick the Provider Type from the list available
4. Pick the Specialty from the list available
5. Enter the start date desired
6. Move all available taxonomy codes desired from the left box to the right box using >>
 - Now click on the **OK** button
 - Close the Specialty/Subspecialty screen

Add Specialty/Subspecialty:

Location: 00-WOOD CLINIC PS *

Administration: HRSA-Health and Recovery Services Administration *

Provider Type: 20-Allopathic & Osteopathic Physicians *

Specialty: 80-Pediatrics *

Start Date: 01/07/2013 *

End Date:

Add Taxonomy Code:

Available Taxonomy Codes	Associated Taxonomy Codes *
2080A000X-Adolescent Medicine 2080I0007X-Clinical & Laboratory Immunology 2080N0001X-Neonatal-Perinatal Medicine 2080P0006X-Developmental, Behavioral Pediatrics 2080P0008X-Neurodevelopmental Disabilities 2080P0201X-Pediatric Allergy & Immunology 2080P0202X-Pediatric Cardiology 2080P0203X-Pediatric Critical Care Medicine 2080P0204X-Pediatric Emergency Medicine 2080P0205X-Pediatric Endocrinology	208000000X-Pediatrics

OK Cancel

Finish the process by clicking on Step 17:

<input type="checkbox"/>	Step 17: Submit Modification for Review	Required	07
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With the screen open, click on the **Submit Provider Modification** button on the top left of the screen. The request has been sent to the Agency and will be reviewed and approved if your licensure or accreditation cover the request.

How does a provider find the Taxonomy for their practitioners?

At the Wizard screen scroll down to **Step 15: Servicing Provider Information**.

Step 15: Servicing Provider Information	Optional
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Clicking on Step 15 opens the list of practitioners or attending providers.

ProviderOne ID ▲ ▼	Servicing Provider Name ▲ ▼	Servicing Provider NPI ▲ ▼	Start Date ▲ ▼	End Date ▲ ▼	Status ▲ ▼	
2000005	JEANETTE	1990000414	06/07/2007	12/31/2009	Approved	Active
1020001	JEFFREY	1992700001	05/30/2012	12/31/2999	Approved	Active
2000066	SERBAN	1987199999	05/14/2009	12/31/2999	Approved	Active
1000002	ADAM	1981766332	01/17/2011	12/31/2999	Approved	Active
2000100	BROWN,	1990000225	11/21/2011	12/31/2999	Approved	Active

Click on the providers name to see their Wizard screen (which looks similar to the billing provider wizard screen). The Specialty/Subspecialty is the same Step 3 for rendering practitioners taxonomy code list. Click on Step 3 and the system opens the list.

Specialty/Subspecialty List:

Filter By : And

Operational Status: Active

<input type="checkbox"/>	Provider Type ▲ ▼	Specialty/Subspecialty ▲ ▼	Administration ▲ ▼	Start Date ▲ ▼	End Date ▲ ▼	Operational Status ▲ ▼	Status ▲ ▼
<input type="checkbox"/>	20-Allopathic & Osteopathic Physicians	7R-Internal Medicine/00000-Internal Medicine	HRSA	01/17/2011	12/31/2999	Active	Approved

The rendering practitioner may have only one taxonomy listed. If more are desired they can be added following the steps above.

Note: The billing and rendering provider's taxonomy code cannot be used on claims if the date of service is prior to the start date indicated on the taxonomy code. ProviderOne will deny the claim.